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HTTP://PUBLICHEALTH.BROWN.EDU
MESSAGE FROM THE DEAN

I am pleased to present this overview of Brown University’s School of Public Health. Established in 2013, the School aims to improve population health by conducting research to better understand disease risk factors and effective health promotion; educating future generations of health researchers and policymakers; and providing public service by translating research into public policy and improved practice.

While the School itself is new, its educational and research programs are not. Organization as a school comes after more than a decade of strategic planning and targeted investment in Brown’s Public Health Program. These initiatives included the recruitment of new faculty, the creation of new master’s and doctoral degree programs, and the establishment of four new departments that reflect the Program’s specific strengths.

The Brown School of Public Health has three distinguishing features. First is an overarching approach that carries across all departments and the 11 public health research centers and institutes: we learn public health by doing public health. We believe there is no better way for students of public health to learn the models and research methods employed in the field than by engaging in the work of solving real problems. Students are required to complete internships and a mentored research project that has tangible results and truly contributes to knowledge in their field. These projects are carried out most often in the Rhode Island Department of Health, in community agencies, and provider settings.

Second, we wholly embrace Brown University’s ethos of service to others. Our work has an impact on entire populations, with the potential to improve the health and well being of millions. What better way to serve our communities than by helping people live healthier, longer, more productive lives?

And finally, the School is focused on training professionals who can collect, analyze, and apply data that informs public policy. Our faculty model this approach: working at the population level, School of Public Health researchers are devising interventions for substance abuse and tobacco addiction; investigating ways to help people lose weight and keep it off long term; improving the end of life for patients with terminal illness; and studying the utilization of health services in order to help physicians and policymakers navigate an evolving health care system. The goal is to effect change based on evidence, and we are training future public health researchers to do the same.

We are thrilled at the opportunities that status as a school of public health will bring. We look forward to having even broader impact on national and international health policy, and working with other institutions and organizations in the interest of public health around the world.

Terrie Fox Wetle, MS, PhD
Dean, School of Public Health
SHAPES OUR LIVES

THE BROWN SCHOOL OF PUBLIC HEALTH takes a “lifelong health” approach to improving people’s lives.

It begins before conception, through research on environmental exposures that affect fertility and cause birth defects.

It continues through the prime of life: public health at Brown targets the behavioral choices that threaten well being—tobacco and substance abuse, obesity, risky sexual behaviors—and encourage wellness and healthy aging—physical activity, nutrition, injury prevention.

And at the end of life, Brown researchers advocate for a patient-centered, research-based approach to terminal illness that considers a person’s values and beliefs.

This work has an impact on people around the world thanks to partnerships forged locally and globally, from Providence’s South Side to South Africa.

Public health at Brown shapes our lives.
THROUGH RESEARCH, education, and public service, the four public health departments, launched in 2012, strive to improve the health of individuals as well as populations. With close ties to Alpert Medical School, the University, and the wider community, students benefit from substantial opportunities to gain and apply knowledge, while faculty put their findings into practice to impact local, state, and national policy.

EPIDEMIOLOGY

CHAIR: Stephen L. Buka, ScD
NUMBER OF FACULTY: 50

The vibrant community of research and clinical faculty members in this department not only closely mentor future epidemiologists and conduct internationally acclaimed studies to understand the determinants and distribution of diseases, they also translate their findings into policy and practice. Faculty conduct much of their research and mentoring in several centers, including the International Health Institute, the Center for Population Health and Clinical Epidemiology, and the Center for Environmental Health and Technology. Master’s and doctoral program graduates pursue careers in research or in public health that require knowledge of advanced epidemiologic methods.

HEALTH SERVICES, POLICY, AND PRACTICE

CHAIR: Ira B. Wilson, MSc, MD
NUMBER OF FACULTY: 79

Through the varying lenses of their areas of expertise, faculty in this department study the determinants of population health, translate this knowledge into improved public health policy and practice, and train the next generation of researchers and practitioners. Through the Center for Gerontology and Health Care Research, faculty research has produced new measures, including standards of nursing home and hospice quality, that have been adopted nationally. In studying the care of HIV-positive individuals, researchers have developed methods to improve medication adherence and reduce high-risk behaviors. The department’s relationships with Rhode Island state agencies, including the Department of Health, allow faculty and trainees to provide services and take part in the policy-making process.

BIOSTATISTICS

CHAIR: Constantine Gatsonis, PhD
NUMBER OF FACULTY: 16

Biostatistics is a dynamic, growing field, with grounding in medicine and public health, biology, and health-related social sciences. Department faculty develop new statistical theory, methods, and data analytics, and collaborate in interdisciplinary research across broad areas of study, including cancer prevention and screening, HIV/AIDS and health care policy, neuroscience, and genomics. Many faculty are members of the Center for Statistical Sciences, which serves as the biostatistics core for national and local biomedical research projects; or the Center for Evidence-Based Medicine, launched in 2012, which evaluates health care interventions by developing methodologies to analyze available data.
BEHAVIORAL AND SOCIAL SCIENCES

CHAIR: Christopher Kahler, PhD
NUMBER OF FACULTY: 63

By studying the behavioral and social determinants of public health problems, faculty in this department strive to develop interventions to change behaviors and improve social contexts related to public health. Researchers focus on behavioral health issues such as alcohol, tobacco, and other drug abuse; obesity, nutrition, and physical activity; HIV and sexually transmitted infections; and health disparities. They work at the individual, family, organization, community, population, and policy levels and conduct laboratory-based research that informs treatment and intervention development. Affiliations include Brown’s Center for Alcohol and Addiction Studies, Institute for Community Health Promotion, Centers for Behavioral and Preventive Medicine, Center for Gerontology and Health Care Research, International Health Institute, Center for AIDS Research, and Population Studies Training Center.

SPOTLIGHT

AKILAH DULIN KEITA, PHD

Akilah Dulin Keita, an assistant professor of behavioral and social sciences who studies health disparities at the Institute for Community Health Promotion, is using a two-year grant from the Robert Wood Johnson Foundation to examine the risk and protective factors for childhood obesity among Southeast Asians.

Dulin Keita investigates neighborhood contexts of diet, physical activity, obesity, and obesity-related comorbidities, and neighborhood dynamics resulting from urban revitalization and public health interventions. A medical sociologist, she has measured biomarkers, such as levels of the stress-related hormone cortisol, to track stress levels in children from different socioeconomic communities and the relationship of cortisol to obesity.

“I’m very interested in the social stressor process model to explain racial and ethnic disparities in cardiometabolic risk factors,” says Dulin Keita, who joined the Public Health faculty in 2012. She’s also working to identify culturally appropriate childhood obesity interventions.

Her grant, from the Robert Wood Johnson Foundation’s national New Connections program, is offered to early- to mid-career scholars to expand the diversity of perspectives that inform the foundation’s programming.

“This award will connect me to a network of established experts in research and evaluation related to health and health care, while providing me with an opportunity to evaluate a program that has far-reaching implications for childhood obesity,” Dulin Keita says.
Research by Kali Thomas, PhD, left, found that Meals on Wheels, which offers food as well as regular check-ins, helps seniors continue to live independently.

**THE SCHOOL OF PUBLIC HEALTH’S** 11 nationally renowned research centers and institutes focus training and research on key areas including HIV/AIDS, global health, primary care, preventive medicine, and community health. The centers’ interdisciplinary nature gives them a broad, influential voice in the national dialogue, and offers students meaningful opportunities to conduct research and effect change.

**RESEARCH FUNDING**

$40 Million

**External funding to campus-based research centers**

$18 Million

**External funding to affiliated hospital research centers**

**CENTER FOR ALCOHOL AND ADDICTION STUDIES**

Established: 1982

**DIRECTOR:** Peter M. Monti, PhD

Tens of millions of Americans are addicted to alcohol, tobacco, and other drugs. Fortunately, the nearly 100 faculty and staff of this center, the oldest of Brown’s public health centers, are studying how best to treat—and prevent—these dependencies. A recent finding by L. Cinnamon Bidwell, PhD, and Suzanne Colby, PhD, for example, that quitting smoking is as difficult for teens as for
adults, could inform cessation and treatment efforts aimed at young smokers. In all areas, faculty work to advance public understanding that addiction is a preventable and treatable disease.

www.caas.brown.edu

CENTER FOR GERONTOLOGY AND HEALTH CARE RESEARCH

Established: 1986
DIRECTOR: Richard W. Besdine, MD

Feeding tubes worsen ulcers in dementia patients. Medicare plans’ gym benefits are designed to attract healthier enrollees. Services like Meals on Wheels help older Americans stay in their own homes and out of nursing homes. Hospitalizations make the earliest stages of Alzheimer’s the most expensive phase of the disease. These and other findings by investigators in this center, which focuses on chronic illness and long-term care, regularly grab national headlines. Through methodological and substantive research, the multidisciplinary faculty collaborate with hospital-based clinicians and University faculty to enhance quality of life for chronically ill and aging people and to improve quality of care at the end of life.

www.chcr.brown.edu

BROWN UNIVERSITY AIDS PROGRAM

Established: 1988
DIRECTOR: Michelle Lally, MD

Though nationally and internationally known for training providers and students alike, center faculty also play active roles in key state and regional advisory bodies related to HIV and research the AIDS pandemic in a larger context, including its relation to other sexually transmitted infections, to tuberculosis, and to drug addiction. Their work is being extended to parallel infectious disease problems ranging from chronic viral diseases such as hepatitis, to the relationship of the immune system and the development of cancer, to the global spread of multidrug antibiotic resistance.

www.brown.edu/Departments/BRUNAP

INTERNATIONAL HEALTH INSTITUTE

Established: 1988
DIRECTOR: Stephen T. McGarvey, PhD, MPH

What would it cost to reduce HIV risk in Mexico City? According to a study by Omar Galárraga, PhD, just $288 per person, per year. At that price, most gay men and male sex workers would be willing to receive regular prevention education and HIV testing. The economist’s findings epitomize the work of this center, which applies interdisciplinary perspectives to improve public health in developing countries with the goal of strengthening global health research, training, and service activities at Brown. Faculty closely mentor students, who often have training in epidemiology and biostatistics as well as global health, and offer extensive opportunities to conduct field research, publish manuscripts, and present findings at national and international conferences.

publichealth.brown.edu/ihi
CENTER FOR STATISTICAL SCIENCES
Established: 1995
DIRECTOR: Constantine Gatsonis, PhD

Biostatisticians, epidemiologists, and other staff and faculty collaborate with researchers around the world, supporting biomedical studies, clinical trial design, technology assessment, observational studies, and other health services research. Constantine Gatsonis, PhD, offers such support as the group statistician of the American College of Radiology Imaging Network, which studies diagnostic imaging and image-guided therapy for cancer, and the lead statistician of many of their trials. On the other side of the world, Joe Hogan, ScD, develops methods to analyze data that will advance treatment and prevention of HIV in Kenya as the co-director of the Biostatistics Program for AMPATH, a consortium of Kenyan, US, and Canadian universities.

www.stat.brown.edu

CENTER FOR PRIMARY CARE AND PREVENTION
Established: 1995
DIRECTOR: Charles Eaton, MD, MS

Based at the Primary Care Center at Memorial Hospital of Rhode Island, the center’s scientists, physicians, and educators work to improve the delivery and practice of primary care and prevention. They pioneer research in reproductive health, osteoarthritis, weight control, smoking cessation, and access for underserved communities, and reach out to community organizations such as the Urban League, Progresso Latino, Hope Street Ministries, Rhode Island Free Clinic, and Latino Cancer Control Task Force in an effort to create partnerships that will support research agendas.

med.brown.edu/CPCP

CENTERS FOR BEHAVIORAL AND PREVENTIVE MEDICINE
Established: 1998
DIRECTOR: Michael Carey, PhD

Public health and medicine intersect in Brown’s collaboration with The Miriam Hospital to address chronic diseases and conditions as well as leading lifestyle causes of illness and death. Areas of research include diabetes, substance abuse, weight control, cardiovascular health, cancer survivorship, and sleep medicine. Investigators study ways to promote physical activity and motivate other behavior changes, how best to communicate health-related information, and the impacts of health disparities, and translate their findings to improve the quality of life of individuals and communities.

brown.edu/go/CBPM

CENTER FOR POPULATION HEALTH AND CLINICAL EPIDEMIOLOGY
Established: 1998
DIRECTOR: Stephen Buka, ScD

The epidemiologists, physicians, and social scientists in this center study the causes, treatment, and prevention of major health concerns of populations. Environmental exposures and their
SPOTLIGHT

ALCOHOL RESEARCH CENTER ON HIV

The troubling intersection of HIV and excessive alcohol consumption—each a health crisis in its own right—is the focus of the Alcohol Research Center on HIV. Drinking and the virus individually weaken the brain and the liver, and in combination they can complicate health problems by, for example, undermining an HIV-positive patient’s adherence to antiretroviral medication schedules or safe sex practices. With funding from the NIH, ARCH researchers are exploring physiological and behavioral questions raised by the confluence of alcohol and HIV, ranging from changes in brain structure to the effectiveness of intervention efforts. Affiliated faculty of this interdisciplinary center come from throughout Brown’s Division of Biology and Medicine, including Alpert Medical School, and collaborate closely with the Center for AIDS Research, a joint research effort among Brown, Tufts, and affiliated hospitals.

From left, Suzanne Colby, PhD; Peter Monti, PhD; Christopher Kahler, PhD; and Bharat Ramratnam, MD, serve on the ARCH executive committee.
adverse effects, such as miscarriage and cancer, are the province of David Savitz, PhD. With NIH support, he’s studying predictors of postpartum depression and its relationship to fetal health and pregnancy complications. Other faculty investigate impacts of new therapies and collaborate with state agencies to implement treatment and prevention efforts. More broadly, the center is participating in the National Children’s Study, following local participants from birth to age 21 to identify local and environmental influences on their health.

publichealth.brown.edu/CPHCE

INSTITUTE FOR COMMUNITY HEALTH PROMOTION

Established: 2002

DIRECTOR: Kim M. Gans, PhD, MPH, LDN

Tobacco use is the leading preventable cause of death in the US, yet 18 percent of women still smoke cigarettes. Now David M. Williams, PhD, is trying to find out whether moderate exercise such as brisk walking, in combination with the nicotine patch, can help women quit smoking. Many of this center’s studies target underserved populations to determine effective health interventions that are culturally sensitive and linguistically appropriate, all with the goal of empowering people to make positive changes for themselves and their environments.

publichealth.brown.edu/ICHP

CENTER FOR ENVIRONMENTAL HEALTH AND TECHNOLOGY

Established: 2007

DIRECTOR: Karl Kelsey, MD, MOH

Does prenatal exposure to chemicals in plastic bottles and packaged food increase the risk of ADHD or autism? It’s a controversial theory that Joseph Braun, PhD, MSPH, is investigating with the support of a five-year NIH Pathway to Independence Award. Though individual effects may be small—subtle behavior changes, a few IQ points—the epidemiologist notes that population and public impacts could be profound. Big-picture consequences of environmental problems are this center’s focus, with the aim of translating research into practical solutions, including remediation of hazardous contamination through Brown’s National Institute of Environmental Health Sciences-funded Superfund Basic Research Program.

publichealth.brown.edu/ceht

CENTER FOR EVIDENCE-BASED MEDICINE

Established: 2012

DIRECTOR: Thomas Trikalinos, MD, PhD

Brown’s newest public health center was launched with a multidisciplinary team of five faculty. Armed with methodologies from computer science and applied mathematics, as well as software and computational models that they have developed, investigators aim to turn data into applicable methods so that doctors can better treat their patients. The center is collaborating with researchers throughout the University, including at Alpert Medical School and affiliated hospitals.

www.cebm.brown.edu
Center for Evidence-Based Medicine faculty, clockwise from top left: Issa Dahabreh, MD, MS; Christopher Schmid, PhD; Joseph Lau, MD; Thomas Trikalinos, MD, PhD; and Byron Wallace, PhD.
THE BROWN SCHOOL OF PUBLIC HEALTH OFFERS

A broad range of educational programs, from an undergraduate concentration through doctoral-level and postdoctoral training. The School is also part of key community health programs at Alpert Medical School that expose medical students to public health.

275 students
■ 90 undergraduate concentrators
■ 135 master’s students
■ 50 doctoral candidates

Master’s Programs
■ Behavioral and Social Sciences Intervention
■ Epidemiology
■ Biostatistics
■ Clinical and Translational Research
■ Master of Public Health

Joint or Combined Degree Programs
■ Fifth-Year Master’s in Biostatistics
■ Five-Year AB/MPH
■ Five-Year MD/MPH (with Alpert Medical School)

Doctoral Programs
■ Biostatistics
■ Epidemiology
■ Health Services Research
■ Behavioral and Social Health Sciences
■ (in approval process)

Undergraduate degree programs
■ AB in Public Health
■ ScB in Statistics

Educational programs in the School of Public Health build upon the School’s areas of research strength and continue to grow. In the next year, the School plans to add a doctoral program in behavioral and social health sciences that will train future researchers and educators interested in the behavioral and social determinants of public health problems and who will develop interventions to change behaviors and improve social contexts related to public health. All educational programs integrate opportunities to “learn public health by doing public health.”

Degree programs also reflect the evolving needs of the health care workforce—whether they are policymakers, researchers, practitioners, industry, or non-profit leaders. The School of Public Health plays a prominent role in bringing a population health perspective to a variety of degree areas. Newly launched programs include:

CLINICAL AND TRANSLATIONAL RESEARCH

Translating basic science research helps bring new treatments to patients more efficiently and effectively. The School of Public Health offers a number of high-quality, graduate-level educational programs that make this “bench-to-bedside” approach a reality. These training experiences range from taking a single course as a special student to completing a full master’s degree program.

www.brown.edu/academics/public-health/mctr

EXECUTIVE MASTER OF HEALTHCARE LEADERSHIP

The School of Public Health collaborates with Brown’s Office of Continuing Education on its Executive Master of Healthcare Leadership Program, which provides health industry leaders with the training and resources to implement visionary change in their organizations. This 16-month master’s degree program combines online learning with on-campus courses and builds on Brown’s proven strengths in public health, public policy, health economics, and evidenced-based medicine.

www.brown.edu/executive
For someone so young—she’s 25, and in her first year of the Master of Public Health (MPH) program—Estefany Flores-Cortez already has a lot of stories to tell.

She’ll bring you on her nighttime journey across the US border as her asylum-seeking parents fled civil war in Guatemala, desert cacti pricking her bare 6-year-old legs. She’ll portray growing up in Providence, her parents working double-shift factory jobs, her brother spiraling into trouble. She’ll catalog the challenges she faced as a first-generation college undergraduate in New York.

But the stories that animate her the most are the ones about her research at Brown’s School of Public Health—and about her hopes for translating that research into ways to help people like her. “In my first-semester epidemiology lecture, I learned how chronic diseases are more prevalent among minorities from low socioeconomic classes, and it really hit home,” Flores-Cortez says.

Her thesis examines gestational diabetes in minority women, a subject in which she takes more than an academic interest. When Flores-Cortez first returned to Guatemala at age 14, she was shocked to discover that her childhood girlfriends were already parents. Since then, she has mentored pregnant teens, and she has watched as her parents’ health deteriorated. Both now have type 2 diabetes.

“It’s a classic danger of acculturation,” she explains. “Life expectancy actually drops after immigrants have been here 10 years. It’s called the ‘Latino Immigrant Paradox’. It hurts to think my parents have become part of that statistic.”

Once her MPH is under her belt, Flores-Cortez plans to attend medical school, or get a PhD—or maybe both. “I hope to work with at-risk communities, and do research, and maybe even make policy,” she says. “Since I got into the Brown program, I feel like many doors have opened. The sky’s the limit. And I’ve come too far to give up.”

In the meantime, as she studies late, she sometimes sees a Spanish-speaking family that comes to clean the Brown public health building, bringing with them a young boy. He reminds her of herself, tagging along with her dad as he cleaned offices at night. “I feel like I have a lot of personal insight into the gaps in health care for newcomers,” she says. “We need a more community-based approach to medicine, and I want to be part of that change.”—Philippa Jack
COMMUNITY SERVICE AND EDUCATION are integral pieces of public health at Brown. By translating research into public policy and practice, researchers promote physical and mental health, prevent disease and disability, and protect the health of individuals and populations.

IMPROVING ELDER CARE
Though the US long-term care industry is many decades old, quality varies widely, with patient experiences and health outcomes greatly dependent on the state and local policies that govern their care. Vincent Mor, PhD, MEd, led a team of researchers to create the nation’s first database aimed at improving long-term care programs across the US—and the lives of the people who rely on them. Their findings, which will examine how factors such as state policies, regional differences, market factors, and racial segregation affect quality of care, will help policymakers craft guidelines that promote high-quality, cost-effective, equitable care for older Americans.

TRACKING HIV
More than 5 million South Africans are infected with HIV—20 percent of that country’s adults. But Mark Lurie, PhD, a South Africa native who has made it his life’s work to study HIV/AIDS in his homeland, has found that offering antiretroviral therapy early in the infection, when patients are in good health, would reduce new infections and lengthen thousands of lives. Closer to home, the Brown University AIDS Program offers educational lectures and community forums for local agencies and advocacy groups, and program faculty work at the national, state, and local levels to ensure that legislation and policies address HIV-related issues.

IT TAKES A VILLAGE
There’s no shortage of complex social problems that require singular focus and creative problem solving. Faculty, students, and community practitioners in Brown’s new TRI-Lab (Teaching, Research, Impact) will choose just such an issue to tackle each academic year, with conferences and research as well as funding to put solutions into practice. For its pilot project, the TRI-Lab will explore healthy early childhood development, placing a high priority on children living in poverty, who are most at risk socially, academically, and physically; however, the initiative, co-chaired by Stephen Buka, ScD, is designed to benefit all families with young children.

ENSURING ACCESS TO CARE
The Rhode Island legislature, in the belief that every resident has the right to high-quality, affordable health care, empowered the state’s Health Care Planning and Accountability Advisory Council to make recommendations to the governor, General Assembly, and other state agencies regarding health care delivery and financing. Terrie Fox Wetle, dean of the School of Public Health, was appointed to the council in 2012 and is working with the group to assess Rhode Island’s health care needs and make recommendations for improving the health care system. Other faculty work with the Rhode Island Department of Health to improve child health, to prevent and reduce the impact of chronic disease, to address violence in the community, and to develop and test interventions to improve population health.
FRESH TO YOU

Your mother always told you: eat your vegetables. Kim M. Gans, PhD, MPH, LDN, wants to find the best way to help you heed that advice. She recruited local companies to host on-site produce markets and receive nutrition education programming, on the hunch that they would motivate employees to eat more healthfully. Gans also established the “Fresh to You” program, weekly markets held in several locations throughout Providence. The produce, sold by a wholesaler, is fresher and cheaper than that at a grocery store, and since it’s available at the office it’s convenient, too. The study is ongoing, but the benefits of eating more fruits and vegetables are well known: reduced risks of several types of cancer, diabetes, heart disease, and high blood pressure.

HEALTH CARE EXCHANGE

Rhode Island is one of 17 states creating a state health care exchange, which is intended to improve health care access, quality, and affordability. Several public health faculty members serve as members of the Healthcare Reform Commission, a group of professionals from the Rhode Island health care community tasked with advising the state government. Drawing on health services research, the members are not only guiding health care reform implementation, but also helping to identify and remove barriers to access as well as outline the health care workforce and training that will be needed to serve newly insured citizens.
BROWN UNIVERSITY AND PROVIDENCE, RHODE ISLAND

The main campus of Brown University is located on College Hill in a historic landmark residential area overlooking the city of Providence. Established by charter from Rhode Island's General Assembly in 1764, Brown is the third oldest college in New England and will soon be celebrating its 250th anniversary. The School of Public Health is Brown's third professional school, along with Alpert Medical School and the School of Engineering.

The School of Public Health is located at the base of College Hill in an 11-story building (shown at right) overlooking downtown Providence. The location provides easy access to both Brown's main campus and some of its affiliated teaching hospitals, all of which are connected by a convenient shuttle service.

Providence is New England's third-largest city, with a diverse population of 178,000. As the state capital, it is the hub of Rhode Island's business, governmental, and cultural activities. With more buildings than any other town on the National Historic Register, Providence is steeped in history, yet at the same time it's a haven for modern art lovers and foodies, thanks to the Rhode Island School of Design and Johnson & Wales University. The School of Public Health is right in the heart of this vibrant scene.

For more information about the Brown School of Public Health, please contact us at:

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